## Case 18-02013-hb Doc 1 Filed 04/20/18 Entered 04/20/18 08:38:12 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH CAROLINA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Ident	tify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full	name		
	your gove picture ide example,	name that is on rnment-issued entification (for your driver's passport).	Lillie First name  Mosley Middle name	First name  Middle name
	Bring your identificati meeting w		Barthwell Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	used in th	names you have ne last 8 years ur married or nmes.	Lillie Pearl Barthwell	
3.	your Soci number o Individua	ast 4 digits of al Security r federal I Taxpayer tion number	xxx-xx-7838	

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Debtor 1 Lillie Mosley Barthwell

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	115 East Deadfall Road	If Debtor 2 lives at a different address:			
		Greenwood, SC 29649 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Greenwood				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		151 East Deadfall Road Greenwood, SC 29649				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Lillie Mosley Barthwell

Case number (if known)

Par	t 2: Tell the Court About	Your B	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7							
	choosing to file under								
		□с	Chapter 11						
		□с	Chapter 12						
		Πс	Chapter 13						
В.	How you will pay the fee		■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
					tallments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Inc	dividuals to Pay		
			I request tha	t my fee be wa	nived (You may request this option	n only if you are filing for Chapter 7. By la			
						ur income is less than 150% of the offici- installments). If you choose this option,			
						ial Form 103B) and file it with your petiti			
9.	Have you filed for bankruptcy within the	■ No	0.						
	last 8 years?	☐ Ye	es.						
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No	•						
	cases pending or being filed by a spouse who is								
	not filing this case with you, or by a business partner, or by an affiliate?		<del>e</del> 5.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	■ No	o. Go to I	ine 12.					
	residence?	□ Ye		our landlord obta	ained an eviction judgment against	t you?			
		,	C3.	No. Go to line		•			
				Yes. Fill out In	itial Statement About an Eviction J	Judgment Against You (Form 101A) and	file it as part of		
				this bankruptcy	y petition.				

		Document	Page 4 01 52	
Debtor 1	Lillie Mosley Barthwell		Case number (if know	n)

art	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Name	and location of busi	ness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach			Number, Street, City, State & ZIP Code					
	it to this petition.				to describe your business:				
					ess (as defined in 11 U.S.C. § 101(27A))				
				9	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))					
					(as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria adlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu 11 U.S.C. 1116(1)(B).						
		■ No.	I am n	ot filing under Chap	ter 11.				
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am fi	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.				
art	4: Report if You Own or	Have Any	/ Hazardo	us Property or Any	Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.							
	property that poses or is alleged to pose a threat of imminent and	■ No.	What is t	he hazard?					
	identifiable hazard to public health or safety? Or do you own any property that needs			iate attention is					
	immediate attention?		needed,	why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?					
					Number, Street, City, State & Zip Code				

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Debtor 1 Lillie Mosley Barthwell

Case number (if known)

Part 5:

## **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Lillie Mosley Barthwell Document Page 6 of 52 Case number (if known)

Par	6: Answer These Questi	ons for Re	eporting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily consult individual primarily for a personal,		are defined in 11 U.S.C. § 101(8) as "incurred by a"	an				
			☐ No. Go to line 16b.							
			■ Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you owe th	at are not consumer debts or b	pusiness debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available		pt property is excluded and administrative expenseditors?	ses				
	administrative expenses are paid that funds will		No							
	be available for distribution to unsecured creditors?		Yes							
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000					
19.	How much do you estimate your assets to be worth?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 million	n					
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 millior □ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 millio	n					
Par	7: Sign Below									
For	you	I have ex	amined this petition, and I declare	under penalty of perjury that the	e information provided is true and correct.					
					eligible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.					
			ney represents me and I did not pa t, I have obtained and read the not		no is not an attorney to help me fill out this 2(b).					
		I request	relief in accordance with the chapte	er of title 11, United States Coo	de, specified in this petition.					
		bankrupto and 3571	cy case can result in fines up to \$25		noney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	19,				
		Lillie Mo	Mosley Barthwell osley Barthwell of Debtor 1	Signature of	f Debtor 2	-				
		Executed	on April 16, 2018	Executed or	1					
			MM / DD / YYYY		MM / DD / YYYY	-				

Debtor 1 Lillie Mosley Barthwell Page 7 of 52

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alecia T. Compton	Date	April 16, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Alecia T. Compton Printed name		
Alecia Compton Law Office, LLC		
Firm name		
109 Oak Avenue		
Suite A		
Greenwood, SC 29646		
Number, Street, City, State & ZIP Code		
Contact phone (864) 450-9042	Email address	alecia@aleciacomptonlawoffice.com
5847 SC		
Bar number & State		

	Case	e 18-02013-hb	Doc 1	Filed 04/2		Entered 04 se 8 of 52	4/20/18 08	:38:12	Desc	Main
Fill in	this inforn	nation to identify your	case:							
Debto	or 1	Lillie Mosley Bart						$\neg$		
Debto	· · · · · ·	First Name	Middle	Name	Last Na	ame				
	of ∠ e if, filing)	First Name	Middle	Name	Last Na	ame				
United	d States Ba	nkruptcy Court for the:	DISTRICT	OF SOUTH CA	AROLINA					
Case (if know	number _			_						if this is an ed filing
Sum	nmary o	rm 106Sum of Your Assets								2/15
inform	nation. Fill o	and accurate as possib out all of your schedul ns, you must fill out a	es first; then	n complete the	information	on this form	. If you are filin			
Part 1	Summ	arize Your Assets								
									Your as Value of	sets what you own
		<b>/B: Property</b> (Official Fo e 55, Total real estate, fo		e A/B					\$	95,400.00
,	1b. Copy lin	e 62, Total personal pro	perty, from S	chedule A/B					\$	61,171.98
,	1c. Copy line	e 63, Total of all property	y on Schedul	le A/B					\$	156,571.98

Your	liabilities
Amou	int vou owe

- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)
   Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...
  - \$ 164,495.00
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)
   Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....
- \$\_\_\_\_\_
- 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....
- \$ 7,451.50

Your total liabilities \$

171,946.50

2,412.00

## Part 3: Summarize Your Income and Expenses

## Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,288.75 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

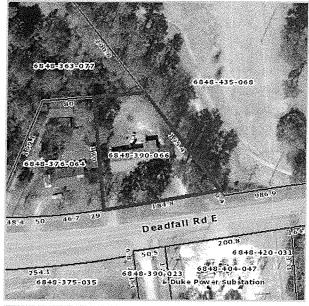
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ill in	this informatior	to identify	your case and th						U U	. //					
Debtor	r1 Lil	lie Mosley	Barthwell												
) obtor		t Name	Middle	Name			Last I	Name							
Debtor Spouse,		t Name	Middle	Name			Last I	Name				_			
Jnited	States Bankrupt	cy Court for	the: DISTRICT	OF SOL	UTH (	CAROLIN	NΑ								
`ase r	number														Check if this is ar
							_							_	amended filing
Sch	cial Form	/B: Pr	operty	an accot	t only	once If s	20.200	ot fits	in mor	o than on	o cato	nory lie	et the asset i	n tha	12/15
ink it f forma	fits best. Be as co tion. If more space every question.	omplete and a e is needed, a	escribe items. List a accurate as possible attach a separate sh uilding, Land, or Otl	e. If two neet to th	marri this for	ed people rm. On the	e are fi e top d	iling to of any	ogethe additio	r, both are	e equa	lly resp	onsible for s	upply	
.1	es. Where is the pr			What	t is thu	e property	u <b>2</b> Char	ماد ماد عام	at annly						
	15 Deadfall Ro	oad E		vviiat		gle-family h		JK all lile	ат аррту		Do	not ded	luct secured o	laime	or exemptions. Put
St	treet address, if availal	ole, or other des	cription	<u>-</u>	Dup	lex or mult	ti-unit b		-		the	amoun	t of any secur	ed cla	ims on Schedule D: ecured by Property.
_	Greenwood	SC	29649-0000		Land			bile ho	me			ire prop			urrent value of the ortion you own?
Ci	ity	State	ZIP Code		_	estment pro eshare	operty						95,400.00		\$95,400.00
											(su	ch as f	ee simple, te		ownership interest by the entireties, or
				Who	-	n interest tor 1 only	t in the	prope	erty? C	heck one	_	re estat e sim	e), if known. ple		
G	reenwood					tor 2 only						'	-		
Co	ounty					tor 1 and I	Debtor	2 only	,		п	Check	k if this is co	mmun	ity property
				Other		east one of					ш еп	`	structions)		
						lentification			abo		, <b></b>	45 10			
			ortion you own fo Part 1. Write that												\$95,400.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Greenwood County, SC - Property Report Convert to PDF 3/7/2018								
Parcel ID	Property Address	Description						
6848-390-066	115 Deadfall Rd E	LT 2 TAYLO	OR EST(.64AC)					



Owner Information							
Owner Name	BARTHWELL LILLIE M						
Mailing Address	115 DEADFALL RD E						
City, State Zip	GREENWOOD, SC 29649- 0000						



Mobile Maps and Information



Disclaimer: Map and parcel data are believed to be accurate, but accuracy is not guaranteed. This is not a legal document and should not be substituted for a title search, appraisal, survey, or for zoning verification.

Parcel Information									
Subdivision	FEMA LOMA	On Lake Gwd	Deed	Plat	Purchase Date				
	No	No	<u>665-209</u>	<u>12-133</u>	3/15/2001				

Improvements										
Year Built	Square Ft	Bedrooms	Bathrooms	Half Baths	Fin Bsmt SqFt	Unfin Bsmt SqFt				
1964	2,118	0	0	0	0	0				

Assessor Information								
Appraised by	Tax District	Tax Exempt	Assessed Value					
County	6-Greenwood Metro		3820					

	Assessor Valuation			
Tax Value - Land	Cap Value - Land	Fair Market Value - Land		
\$12,000	\$13,800	\$12,000		
Tax Value - Improvements	Cap Value - Improvements	Fair Market Value - Improv.		
\$83,400	\$95,900	\$83,400		
Tax Value - Total	Cap Value - Total	Fair Market Value - Total		
\$95,400	\$109,700	\$95,400		

Debt	tor 1 L	illie Mosley Barthwell	Document Page 12 of 52	ase number (if known)	
3. <b>C</b> a	ars, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
	Yes				
2 1	Make:	Chevrolet	Who has an interest in the preperty? Cheek one	Do not deduct secured of	claims or exemptions. Put
Model: Cavalier			Who has an interest in the property? Check one  Debtor 1 only		red claims on Schedule D:
	Year:	2004	☐ Debtor 2 only	Current value of the	Current value of the
		mate mileage: 114,169	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:	$\square$ At least one of the debtors and another		
	Location	G1JC52F347118253 on: 115 East Deadfall Greenwood SC 29649	☐ Check if this is community property (see instructions)	\$1,450.00	\$1,450.00
5 <b>A</b>	ages you		n for all of your entries from Part 2, including a that number here		\$1,450.00
6. <b>H</b> c	<b>ousehold</b> ixamples:	or have any legal or equitable information goods and furnishings Major appliances, furniture, linens	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
			ances, Kitchenware, Linens ast Deadfall Road, Greenwood SC 29649		\$800.0
E	l <sub>No</sub>		eo, stereo, and digital equipment; computers, printe nedia players, games	ers, scanners; music collect	ions; electronic devices
E	xamples:	s of value Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictures, or other ar llectibles	t objects; stamp, coin, or ba	aseball card collections;
E	xamples:	musical instruments	d other hobby equipment; bicycles, pool tables, go	lf clubs, skis; canoes and k	ayaks; carpentry tools;
10. <b>F</b>	Firearms Examples I No	escribe  E: Pistols, rifles, shotguns, ammunit  escribe	tion, and related equipment		

	Case 18-02013-		iled 04/20/18 Entered 04/20/18 08:38:1 ocument Page 13 of 52	.2 Desc Main
Debtor 1	Lillie Mosley Barth	well	Occument Page 13 of 52  Case number (if known)	n)
	mples: Everyday clothes, fu	urs, leather coats, des	gner wear, shoes, accessories	
		ning & Personal Ite ition: 115 East Dea	ms dfall Road, Greenwood SC 29649	\$350.00
	mples: Everyday jewelry, c	ostume jewelry, engaç	ement rings, wedding rings, heirloom jewelry, watches, gems	, gold, silver
		. Costume Jewelry tion: 115 East Dea	dfall Road, Greenwood SC 29649	\$100.00
Exa ■ No □ Ye 14. <b>Any</b> ■ No	s. Describe other personal and house	ehold items you did	not already list, including any health aids you did not list	
15. <b>Ad</b>	d the dollar value of all of	f your entries from Pa	art 3, including any entries for pages you have attached	\$1,250.00
	Describe Your Financial Ass			
Do you	own or have any legal or	equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you have in		me, in a safe deposit box, and on hand when you file your pet	ition
			unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	e houses, and other similar
□ No ■ Ye	S		Institution name:	
	17.1	Checking Acco	unt Wells Fargo	\$516.57
	17.2	Savings Accou #3703	nt Wells Fargo	\$90.00
	17.3	Checking Acco	unt United Community Bank	\$514.46
	•		kerage firms, money market accounts	
	S	Institution or issuer i	name:	

Official Form 106A/B Schedule A/B: Property page 3

Case 18-02013-hb Doc 1 Filed 04/20/18 Entered 04/20/18 08:38:12 Page 14 of 52
Case number (if known) Document Debtor 1 Lillie Mosley Barthwell 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

	10
--	----

Yes. Give specific information about them, including whether you already filed the returns and the tax years......

2017 Tax Refund \$1,306.00 Federal & State

	Case 18-0201	.3-hb	Doc 1			ered 04/20/18 08:38:12	Desc Main
Debtor '	Lillie Mosley Ba	rthwell		Document	raye I	5 of 52 Case number (if known)	
Exa ■ No	•		mony, spousa	al support, child supp	ort, mainten	nance, divorce settlement, property	settlement
	ж. С. го оросии и и с. и и						
Exa	benefits; unpaid	disability i I loans yo	insurance pay		efits, sick p	ay, vacation pay, workers' compen	sation, Social Security
			nsurance; hea	alth savings account (	HSA); credi	it, homeowner's, or renter's insuran	ce
	es. Name the insurance		of each polic ny name:	cy and list its value.		Beneficiary:	Surrender or refund value:
			bian Life #9662				\$4,981.00
			nbian Life #9604				\$1,063.95
33. <b>Clai</b> <i>Exa</i> ■ No	amples: Accidents, empl	es, wheth oyment d				a demand for payment	
	er contingent and unli		claims of ev	very nature, includin	g counterc	laims of the debtor and rights to	set off claims
_	es. Describe each claim	١					
			Date of A	I Injury Lawsuit ag Accident 2/5/16 nted by Chad L. B Ave, Suite 104, G	acon, Fos	ster Law Firm, 601 E.	\$50,000.00
■ No	financial assets you do		ready list				
		•			•	for pages you have attached	\$58,471.98
Part 5:	Describe Any Business-F	Related Pr	operty You Ov	vn or Have an Interest	In. List any r	eal estate in Part 1.	
	ou own or have any legal						
	Go to Part 6.	•		-			
☐ Yes	s. Go to line 38.						

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Lillie Mosley Barthwell Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$95,400.00 Part 2: Total vehicles, line 5 \$1,450,00 57. Part 3: Total personal and household items, line 15 \$1,250.00 Part 4: Total financial assets, line 36 \$58,471.98 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$61,171.98

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$61,171.98

\$156,571.98

Fill in this infor							
Debtor 1	Lillie Mosley Bart	Lillie Mosley Barthwell					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF SOUTH CAROLINA					
Case number _					☐ Check if this is an		
					amended filing		

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
200 mile	4 Chevrolet Cavalier 114,169	\$1,450.00		\$1,450.00	S.C. Code Ann. § 15-41-30(A)(2)	
VIN Loc Gre	/IN# 1G1JC52F347118253 .ocation: 115 East Deadfall Road, Greenwood SC 29649 .ine from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	/	
Fur Line	niture, Appliances, Kitchenware,	\$800.00		\$800.00	S.C. Code Ann. § 15-41-30(A)(3)	
Loc Gre	eation: 115 East Deadfall Road, eenwood SC 29649 from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)	
	thing & Personal Items ation: 115 East Deadfall Road,	\$350.00		\$350.00	S.C. Code Ann. § 15-41-30(A)(3)	
Gre	enwood SC 29649 from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)	
	c. Costume Jewelry	\$100.00		\$100.00	S.C. Code Ann. § 15-41-30(A)(4)	
Location: 115 East Deadfall Road, Greenwood SC 29649 Line from Schedule A/B: 12.1				100% of fair market value, up to any applicable statutory limit	10-41-90(7)(4)	

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Case number (if known)

De	DIOI I LIIIIE WOSIEY Bartiiweii			Case Hulliber (II KHOWII)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking Account #3917: Wells Fargo	\$516.57		\$516.57	S.C. Code Ann. § 15-41-30(A)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings Account #3703: Wells Fargo Line from Schedule A/B: 17.2	\$90.00		\$90.00	S.C. Code Ann. § 15-41-30(A)(5)
	Zine nem somedule /v Zi · · · · Z			100% of fair market value, up to any applicable statutory limit	
	Checking Account #2890: United Community Bank	\$514.46		\$514.46	S.C. Code Ann. § 15-41-30(A)(5)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	Federal & State: 2017 Tax Refund Line from Schedule A/B: 28.1	\$1,306.00		\$1,306.00	S.C. Code Ann. § 15-41-30(A)(5)
	Zine nem somedale /v B. Zer :			100% of fair market value, up to any applicable statutory limit	
	Columbian Life Policy #9662	\$4,981.00		\$4,725.00	S.C. Code Ann. § 15-41-30(A)(9)
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	Columbian Life Policy #9604	\$1,063.95		\$1,063.95	S.C. Code Ann. § 15-41-30(A)(5)
	Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	Personal Injury Lawsuit against CVS Date of Accident 2/5/16	\$50,000.00		\$50,000.00	S.C. Code Ann. § 15-41-30(A)(12)(b)
	Represented by Chad L. Bacon, Foster Law Firm, 601 E. McAbee Ave, Suite 104, Greenville, SC 29601 Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this information to identify yo	our case:	Paue 19	11 :32		
Debtor 1 Lillie Mosley B	arthwell				
First Name	Middle Name	Last Name		-	
Debtor 2				_	
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	e: DISTRICT OF SOUTH CAROL	INA		-	
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
Official Form 106D					
	- \A/b -	C = = = = =	h Dans and		
Schedule D: Creditor	s who have Claims	Securea	by Propert	<u>y                                    </u>	12/15
Be as complete and accurate as possible is needed, copy the Additional Page, fill in number (if known).					
1. Do any creditors have claims secured	hy your property?				
		rechadulas Vai	Lhave nothing also t	to roport on this form	
_	this form to the court with your other	scriedules. 100	a nave nothing else t	to report on this form.	
Yes. Fill in all of the information	n below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has			Column A	Column B	Column C
for each claim. If more than one creditor had much as possible, list the claims in alphabe			Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	thear order according to the creations main		value of collateral.	claim	If any
2.1 First Citizens Corp	Describe the property that secures	the claim:	\$450.00	\$500.00	\$0.00
Creditor's Name	HHG				
005 14 1 00 11					
205 Main Street	As of the date you file, the claim is:	Check all that			
Greenwood, SC 29646-2759	apply.				
Number, Street, City, State & Zip Code	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as	mortgage or secu	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	Non-Purcha	se Money Securi	ty	
community debt				-	
Date debt was incurred	Last 4 digits of account num	ber <u>1756</u>			
2.2 Mr. Cooper	Describe the property that secures		\$142,277.00	\$95,400.00	\$46,877.00
Creditor's Name	115 Deadfall Road E Greenv	vood, SC			
Attn: Bankruptcy 8950 Cypress Waters	29649				
Blvd	As of the date you file, the claim is:	Check all that			
Coppell, TX 75019	apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
rambor, onosi, ony, onto a zip oodo	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as	mortgage or secu	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	_ ' '	,			
☐ Check if this claim relates to a	Other (including a right to offset)	First Mortga	ige		

community debt

# 

Debtor 1 Lillie Mosl	ey Barthwell		Ca	ase number (if know)				
First Name	Middle Na	ame Last Name						
Date debt was incurred	Opened 05/07 Last Active 8/31/17	Last 4 digits of account number	5039					
2.3 OneMain		Describe the property that secures the cl	aim·	\$5,589.00	\$500.00	\$5,089.00		
Creditor's Name		HHG		φ3,303.00	φ300.00	ψ5,003.00		
Attn: Bankrupt 601 Nw 2nd St		As of the date you file, the claim is: Check	all that					
Evansville, IN		apply.  Contingent						
Number, Street, City, S	tate & Zip Code	☐ Unliquidated ☐ Disputed						
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.						
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortg car loan)	age or secur	ed				
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic	c's lien)					
☐ At least one of the deb		☐ Judgment lien from a lawsuit	,					
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	n-Purchas	se Money Security				
Date debt was incurred	Opened 10/15	Last 4 digits of account number	0029					
2.4 Quick Credit		Describe the property that secures the cl	aim:	\$315.00	\$500.00	\$0.00		
Creditor's Name		HHG						
724B Montagu Greenwood, S	C 29649	As of the date you file, the claim is: Check apply.  Contingent Unliquidated	all that					
, , , , , , , , , , , , , , , , , , , ,	,	☐ Disputed						
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.						
■ Debtor 1 only		☐ An agreement you made (such as mortgage or secured						
Debtor 2 only		car loan)						
Debtor 1 and Debtor 2	•	Statutory lien (such as tax lien, mechanic's lien)						
At least one of the deb		Judgment lien from a lawsuit	. Durahas	a Manay Caayriity				
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	1-Purchas	se Money Security				
Date debt was incurred	Opened 09/17	Last 4 digits of account number	6578					
2.5 Security Finan	ce	Describe the property that secures the cl	aim:	\$1,407.00	\$500.00	\$907.00		
Creditor's Name		HHG						
446 Calhoun A Greenwood, S	C 29646	As of the date you file, the claim is: Check apply.  Contingent Unliquidated	all that					
Who owes the debt?	hock one	Disputed						
Who owes the debt? Co  Debtor 1 only	песк опе.	Nature of lien. Check all that apply.  An agreement you made (such as mortg car loan)	age or secur	ed				
Debtor 2 only		_	-1- !!>					
☐ Debtor 1 and Debtor 2☐ At least one of the deb	=	☐ Statutory lien (such as tax lien, mechanic☐ Judgment lien from a lawsuit	s lien)					

Official Form 106D

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Debtor 1 Lillie Mosley Barthwell			Case number (if know)		
First Name Middle N	ame Last Name				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Non-Puro	hase Money Security		
Date debt was incurred 10/11/17	Last 4 digits of account num	ber 0151			
2.6 <b>Southern Finance</b> Creditor's Name	Describe the property that secures	the claim:	\$432.00	\$500.00	\$0.00
213 Main Street Greenwood, SC	As of the date you file, the claim is:	Check all that			
29646-2759  Number, Street, City, State & Zip Code	apply.  Contingent				
Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed  Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as car loan)	mortgage or s	ecured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Non-Puro	hase Money Security		
Opened Date debt was incurred 09/17	Last 4 digits of account num	ber 9581			
Specialized Loan Servicing/SLS	Describe the property that secures	the claim:	\$13,535.00	\$95,400.00	\$13,535.00
Creditor's Name	115 Deadfall Road E Greenv 29649				
Attn: Bankruptcy Po Box 636005	As of the date you file, the claim is: apply.	Check all that			
Littleton, CO 80163  Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as car loan)		ecured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, me☐ Judgment lien from a lawsuit		_		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Second N	Nortgage		
Opened 10/07 Last					
Date debt was incurred 6/05/17	Last 4 digits of account num	ber 5803	<u> </u>		
2.8 Western Shamrock Corp Creditor's Name	Describe the property that secures	the claim:	\$490.00	\$500.00	\$0.00
fdba Western Finance	HHG				
801 S Abe St Ste A San Angelo, TX 76903	As of the date you file, the claim is: apply.	Check all that			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or s	ecured		

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1 Lillie Mosl	ey Barthwell		Case number (if know)		
First Name	Middle Na	me Last Name			
☐ Debtor 1 and Debtor 2 ☐ At least one of the deb	tors and another	☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit			
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	Non-Purchase Money Security		
Date debt was incurred	Opened 10/11/17 Last Active 11/09/17	Last 4 digits of account num	mber <u>Z005</u>		
Add the dollar value of your entries in Column A on this page. Write that number here:  If this is the last page of your form, add the dollar value totals from all pages.  Write that number here:  Part 2: List Others to Be Notified for a Debt That You Already Listed					
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.					
Name, Number, St Albertelli Law 1201 Main Str		ip Code	On which line in Part 1 did you enter the creditor?		
Columbia, SC			<u> </u>		

Fill	in this inform	ation to identify your	case:						
De	btor 1	Lillie Mosley Bart	thwell						
Da	First Name Middle Name Last Name								
1	btor 2 ouse if, filing)	First Name	Middle	Name	Last Name				
Un	ited States Ban	kruptcy Court for the:	DISTRICT	OF SOUTH CAROLI	INA				
00	a a numbar								
1	se number							Check	f this is an
								amende	ed filing
Of	ficial Form	106F/F							
		F: Creditors W	/ho Have	e Unsecured (	Claims				12/15
any Sch	executory contra edule G: Executo	accurate as possible. Us acts or unexpired leases ory Contracts and Unexp	that could re pired Leases (	sult in a claim. Also lis Official Form 106G). Do	st executory contract o not include any cre	s on Schedule A/B: F ditors with partially s	Property (Of secured clai	ficial Forr	n 106A/B) and on re listed in
left.		rs Who Have Claims Sec inuation Page to this pag ber (if known).							
Pa	rt 1: List All	of Your PRIORITY Ur	nsecured Cla	aims					
1.	_	s have priority unsecure	ed claims agai	inst you?					
	□ No. Go to Pa	ırt 2.							
2	Yes.	priority unsecured claim	s If a creditor	has more than one priori	ity unsecured claim lis	at the creditor separate	ly for each c	laim For 6	each claim listed
۷.	identify what type possible, list the	e of claim it is. If a claim ha claims in alphabetical ord nan one creditor holds a pa	as both priority er according to	and nonpriority amounts to the creditor's name. If y	s, list that claim here are you have more than two	nd show both priority a	nd nonpriori	ty amount	s. As much as
	(For an explanat	ion of each type of claim,	see the instruc	tions for this form in the	instruction booklet.)	Total claim	Priority amount		Nonpriority amount
2.1				Last 4 digits of accoun	t number	\$0.00		\$0.00	\$0.00
	Priority Cred		,	When was the debt inc	urred?				
	Philadel	phia, PA 19101-734					-		
		eet City State Zlp Code the debt? Check one.		As of the date you file,	the claim is: Check a	II that apply			
				☐ Contingent					
	Debtor 1 on			☐ Unliquidated					
	☐ Debtor 2 on	•		Disputed					
		nd Debtor 2 only		Type of PRIORITY unse					
		e of the debtors and another	C1	Domestic support obl					
		is claim is for a commu	-	Taxes and certain oth	-	-			
	Is the claim su	ubject to offset?		Claims for death or p	ersonal injury while yo	u were intoxicated			
	■ No □ Yes			Other. Specify	tice Only				
_									
2.2		Γ OF REVENUE		Last 4 digits of accoun	t number	\$0.00		\$0.00	\$0.00
	PO BOX	ditor's Name 12265 BIA, SC 29211		When was the debt inc			-		
		eet City State Zlp Code		As of the date you file,	the claim is: Check a	II that apply			
	Who incurred the debt? Check one.								
	■ Debtor 1 only □ Unliquidated								
	Debtor 2 on	nly		☐ Disputed					
	Debtor 1 an	nd Debtor 2 only		Type of PRIORITY unse					
	☐ At least one	e of the debtors and anothe	er	☐ Domestic support obl	ligations				
	☐ Check if th	is claim is for a commu	•	Taxes and certain oth	· · · · · · · · · · · · · · · · · · ·	-			
		ubject to offset?		☐ Claims for death or p	ersonal injury while yo	u were intoxicated			
	■ No			Other. Specify					
	☐ Yes			Not	tice Only				

Page 24 of 52 Case number (if know) Document Debtor 1 Lillie Mosley Barthwell

	List All of Your NONPRIORITY Unsecu							
	□ No. You have nothing to report in this part. Submit		edube					
	<u> </u>	inis form to the court with your other some	saules.					
	Yes.							
1	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what t	type of claim it is. Do not list claims already inc	luded in Part 1. If more				
				Total claim				
4.1	Chad L. Bacon, Esq.	Last 4 digits of account number		\$0.00				
	Nonpriority Creditor's Name							
	Foster Law Firm 601 E. McAbee Avenue	When was the debt incurred?		-				
	Suite 104							
	Greenville, SC 29601	_						
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	Пол						
	_	☐ Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated						
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans						
	_							
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	and the state of t					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Notice Only	/	=				
4.2	Comenity Capital/mprc	Last 4 digits of account number	3106	\$189.00				
	Nonpriority Creditor's Name		Opened 11/16 Last Active					
	Po Box 182125 Columbus, OH 43218	When was the debt incurred?	1/07/18	-				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another							
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other Specify Charge Acc						
	<b>—</b> 163	Uther, Specify Uniange Act						

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Debtor 1 Lillie Mosley Barthwell Case number (if know) 4.3 \$523.00 **Fingerhut** Last 4 digits of account number 3576 Nonpriority Creditor's Name **Bankruptcy Dept** Opened 12/06 Last Active 6250 Ridgewood Rd When was the debt incurred? 7/17/12 Saint Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes **HRBlock/Emerald Card** 4.4 Last 4 digits of account number 3336 \$369.50 Nonpriority Creditor's Name PO Box 10170 When was the debt incurred? Kansas City, MO 64171-0170 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card Other. Specify Santander Consumer USA \$5,023.00 4.5 1000 Last 4 digits of account number Nonpriority Creditor's Name Po Box 961245 When was the debt incurred? **Opened 06/16** Ft Worth, TX 76161 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Deficiency Balance

☐ Yes

Page 26 of 52 Case number (if know) Document Debtor 1 Lillie Mosley Barthwell 4.6 Synchrony Bank Last 4 digits of account number 1816 \$512.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/06 Last Active Po Box 965060 When was the debt incurred? 7/19/12 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Visa Dept Store National 8030 \$835.00 4.7 Bank/Macy's Last 4 digits of account number Nonpriority Creditor's Name Opened 10/91 Last Active Attn: Bankruptcy 7/19/12 Po Box 8053 When was the debt incurred? Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? FBCS, Inc. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 330 S. Warminster Rd Part 2: Creditors with Nonpriority Unsecured Claims Suite 353 Hatboro, PA 19040 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address MRS BPO, LLC Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1930 Olney Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Cherry Hill, NJ 08003 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **NCB** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims One Allied Drive Trevose, PA 19053 Last 4 digits of account number

Schedule E/F: Creditors Who Have Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address

Official Form 106 E/F

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Debtor 1 Lillie Mosley Barthwell

**NCB Management Services** PO Box 1099 Langhorne, PA 19047

Line 4.4 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 0.00
Total claims				 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 7,451.50
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 7,451.50

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Fill in this infor	ill in this information to identify your case:						
Debtor 1	Lillie Mosley Bart						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (	CAROLINA				
Case number							
(if known)					☐ Check if this is an		
					amended filing		

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r <b>company with</b> Name, Numbe	n whom you have the pr, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del></del>

		DOCUM6	ent Page 29 c	)エ 52	
Fill in this	information to identify your				
Debtor 1	Lillie Mosley Bar	thwell			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name		
	tes Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Office Otal	ics bankruptcy Court for the.	BIGHNIOT OF COOTER	O, II COLII V, I		
Case numb (if known)	per				☐ Check if this is an
					amended filing
Official	l Form 106H				
	ule H: Your Cod	ehtors			12/15
ocnea	die II. Tour cou	CDIOIS			12/13
ill it out, ar	nd number the entries in the and case number (if known)	boxes on the left. Attack . Answer every question	n the Additional Page t	to this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir	ne
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Nomo			Schedule D, line	
ſ	Name			☐ Schedule E/F, lir☐ Schedule G, line	
_	<del> </del>			— Scriedule G, line	<u> </u>
	Number Street	State	7IP Code		

Schedule H: Your Codebtors

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Fill	in this information to ic	lentify your ca	se:								
Del	btor 1 <u>L</u>	illie Mosley	Barthwell			_					
	btor 2					_					
Uni	ited States Bankruptcy	Court for the:	DISTRICT OF SOUTH	I CAROLINA		_					
	se number						Chec	k if this is	•		
(If kı	nown)							n amende	_		
_										g postpetition ollowing date:	
0	fficial Form 1	<u>061</u>					N	MM / DD/ \	YYYY		
S	chedule I: Yo	our Inco	ome								12/15
spo atta	use. If you are separa	nted and your o this form. (	are married and not filir r spouse is not filing wi On the top of any addition	th you, do not inclu	de infori	natio	n about	t your sp	ouse. If mo	ore space is i	needed,
1.	Fill in your employr information.	nent		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more tha attach a separate pa	ge with	Employment status	☐ Employed  ■ Not employed				☐ Empl	oyed mployed		
	information about additional employers.	uitioriai	Occupation								
	Include part-time, ses	asonal, or	Employer's name								
	Occupation may inclu or homemaker, if it a		Employer's address								
			How long employed th	nere?				_			
Pa	rt 2: Give Detail	s About Mon	thly Income								
	imate monthly income use unless you are sep		ite you file this form. If $y$	ou have nothing to re	eport for	any I	ine, write	e \$0 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing spo re space, attach a sepa		re than one employer, co	mbine the information	n for all e	emplo	yers for	that perso	on on the li	nes below. If y	ou need
							For Del	btor 1		btor 2 or ng spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$		0.00	\$	N/A	
3.	Estimate and list m	onthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inc	ome. Add lin	e 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

# 

Debt	tor 1	Lillie Mosley Barthwell		C	Case	number (if known)					
					For	Debtor 1			otor 2 or		
	Сор	by line 4 here	4.		\$_	0.00		\$		N/A	
5.	List	all payroll deductions:									
٥.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	0.00	,	\$		I/A	
	5b.	Mandatory contributions for retirement plans	5b		$^{*}$	0.00		\$		VA VA	
	5c.	Voluntary contributions for retirement plans	5c.		<b>\$</b> —	0.00		\$		I/A	
	5d.	Required repayments of retirement fund loans	5d		<u>*</u> —	0.00		\$		I/A	
	5e.	Insurance	5e		\$	0.00	;	\$		I/A	
	5f.	Domestic support obligations	5f.		\$	0.00	;	\$	١	I/A	
	5g.	Union dues	5g		\$_	0.00	;	\$	1	I/A	
	5h.	Other deductions. Specify:	5h	.+	\$_	0.00	+ :	\$	ı	I/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	:	\$	N	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	:	\$	N	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00		\$		√A	
	8b.	Interest and dividends	8b		<u>*</u> -	0.00		\$		I/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$_	0.00	;	\$		N/A	
	8d.	Unemployment compensation	8d		\$_	0.00	:	\$		I/A	
	8e.	Social Security	8e		\$	1,125.00	:	\$	1	I/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	0.00		\$		V/A	
	8g.	Pension or retirement income	8g		\$_	1,288.75		\$		1/A	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$_	0.00	+ :	\$	ı	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	2,413.75	;	\$		N/A	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,413.75 + \$		- N	/A  =   \$		2.413.75
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		<b>2,413.73</b> + Ψ_		IN	-   Ψ		2,413.73
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		,	•	•	in Sche	dule J.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain lies						it	12. \$_		2,413.75
13.	Doy	you expect an increase or decrease within the year after you file this form	?							nbine nthly	ed income
		No.									
	П	Yes Explain:									

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	otor 1 Lillie Mosley Barthwell		Check	if this is:	
		_		an amended filing	
1	ouse, if filing)				ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: DISTRICT OF SOUTH CAROL	INA		MM / DD / YYYY	
				, 22 ,	
	nown)				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th mber (if known). Answer every question.				
Par					
1.	Is this a joint case?				
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	ses for Separate House	hold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				Yes
					□ No □ Yes
					☐ Yes
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est exp	imate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a su blicable date.				
Incl	lude expenses paid for with non-cash government assistanc value of such assistance and have included it on Schedule I	e if you know			
	ficial Form 106l.)	. Your income		Your expe	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	4. \$		862.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's association or condominium dues	hama aquib: lasas	4d. \$		0.00
5.	Additional mortgage payments for your residence, such as	nome equity loans	5. \$		0.00

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Deptor 1 _	Lillie Mosley Barthwell	Case Hulli	ber (if known)	
6. <b>Utilitie</b>	s:			
	Electricity, heat, natural gas	6a.	\$	150.00
	Water, sewer, garbage collection	6b.	·	50.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.		80.00
	Other. Specify: <b>Trash Pick-up</b>	6d.	·	44.00
	and housekeeping supplies	7.	· -	350.00
	are and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.		30.00
	nal care products and services	10.		
	•		·	60.00
	al and dental expenses	11.	Ф	50.00
	portation. Include gas, maintenance, bus or train fare.	12.	\$	150.00
	include car payments. ainment, clubs, recreation, newspapers, magazines, and books	13.		50.00
	able contributions and religious donations	14.	·	100.00
5. <b>Insura</b>	_	14.	Ψ	100.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	76.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	60.00
	Other insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify		16.	\$	0.00
	ment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	*	0.00
	Other. Specify: prescriptions/over the counter medicine	17c.	·	300.00
	Other. Specify:	17d.	·	0.00
	payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specify		19.	<u> </u>	
	real property expenses not included in lines 4 or 5 of this form or on Scho	-	ur Income.	
	Mortgages on other property	20a.		0.00
20b. I	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	Specify:	21.	·	0.00
• • • • • • • • • • • • • • • • • •			.Ψ	0.00
	ate your monthly expenses			
22a. A	dd lines 4 through 21.		\$	2,412.00
22b. C	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	dd line 22a and 22b. The result is your monthly expenses.		\$	2,412.00
			·	
	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,413.75
23b. (	Copy your monthly expenses from line 22c above.	23b.	-\$	2,412.00
	Subtract your monthly expenses from your monthly income.	00-	l <sub>e</sub>	1.75
_	The result is your monthly net income.	23c.	\$	1.13
)/ Dove	u expect an increase or decrease in your expenses within the year often	ou file this	form?	
	u expect an increase or decrease in your expenses within the year after your property of the property of the your car loan within the year or do you expect you			se or decrease because of a
	ation to the terms of your mortgage?	or.gage p	,	c c. accidado bodado di a
2 2				
■ No.				

# 

Fill in this infor	mation to identify your	case:			
Debtor 1	Lillie Mosley Bar	thwell			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number					
(if known)					Check if this is an amended filing
				_	
O#: -: -!	400D				
Official Forr	<del></del>		. D. I ( I . O .		
Declarat	tion About a	an Individua	Debtor's Sc	hedules	12/15
if two married pe	eopie are filing togethe	r, both are equally respo	onsible for supplying cor	rect information.	
You must file thi	is form whenever you f	le bankruptcy schedule	s or amended schedules.	. Making a false statem	ent, concealing property, or
obtaining money	y or property by fraud i	n connection with a ban	kruptcy case can result i	in fines up to \$250,000,	or imprisonment for up to 20
years, or both. 1	8 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
■ No					
_	Na			Attack Dandon	unton Datition Duamanania Matica
☐ Yes. I	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
Under pena	alty of perjury, I declare	that I have read the sun	nmary and schedules file	ed with this declaration	and
	e true and correct.		•		
X /s/ Lilli	ie Mosley Barthwell		X		
Lillie N	Mosley Barthwell		Signature of	Debtor 2	
Signatu	re of Debtor 1				
Date	April 16. 2018		Date		

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Fill	in this in	nformation to identify you	r case:								
Del	btor 1	Lillie Mosley Ba	rthwell								
		First Name	Middle Name	Last Name							
1	btor 2 buse if, filing)	) First Name	Middle Name	Last Name							
Uni	ited State	s Bankruptcy Court for the:	DISTRICT OF SOUTH C	CAROLINA							
	se numbe	er				Check if this is an amended filing					
Sta	ateme			duals Filing for E		4/10					
info	rmation.		, attach a separate sheet to	this form. On the top of an							
Par	rt 1: G	ive Details About Your Ma	arital Status and Where Yo	u Lived Before							
1.	What is	your current marital statu	us?								
	_	rried t married									
2.	During	During the last 3 years, have you lived anywhere other than where you live now?									
	■ No		lived in the last 3 years. Do r	not include where you live no	N.						
	Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there					
<b>3.</b> state				gal equivalent in a commu evada, New Mexico, Puerto F							
	■ No		hedule H: Your Codebtors (C	Official Form 106H).							
Par	rt 2 E	xplain the Sources of You	ır Income								
4.	Fill in the	e total amount of income yo	ou received from all jobs and	ng a business during this y all businesses, including par ve together, list it only once u	t-time activities.	alendar years?					
	■ No	s. Fill in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					

Page 36 of 52 Document ase number (if known) Debtor 1 Lillie Mosley Barthwell Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. Describe below. each source (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Social Security &** \$7,203.00 the date you filed for bankruptcy: **Pension** For last calendar year: Social Security & \$33,381.00 (January 1 to December 31, 2017) Pension For the calendar year before that: Social Security & \$28,812.00 (January 1 to December 31, 2016) Pension Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  $\square$  No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount vou Was this payment for ... paid still owe OneMain 2/5/18, 3/5/18 & ■ Mortgage \$925.98 \$5.589.00 Attn: Bankruptcv 4/4/18 ☐ Car 601 Nw 2nd St ☐ Credit Card Evansville, IN 47708 Loan Repayment

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☐ Suppliers or vendors

□ Other

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Lillie Mosley Barthwell

Debtor 1

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Document

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Debtor 1 Lillie Mosley Barthwell

Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and	Describe the gifts	Dates you gave the gifts	Value				
	Address:							
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co	otcy, did you give any gifts or contributions with a tota	I value of more than S	\$600 to any charity?				
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value				
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankrup or gambling?  No Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose anyt	hing because of theft	, fire, other disaster,				
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Pai	t 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or pr	ccy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services required		ty to anyone you				
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Alecia Compton Law Office, LLC 109 Oak Avenue Suite A Greenwood, SC 29646 alecia@aleciacomptonlawoffice.com	Attorney Fees, Filing Fee, Credit Report Fee	2/1/18, 2/8/18, 3/2/18	\$1,500.00				
	Compton Law Firm, P.A. 212 Grace Street Greenwood, SC 29649	Attorney Fee	10/6/17 & 12/6/17	\$800.00				

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Debtor 1 Lillie Mosley Barthwell

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No  Yes. Fill in the details.							
	Person Who Was Paid Address	Description and va	alue of any prope	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, of transferred in the ordinary course of your busin include both outright transfers and transfers made a include gifts and transfers that you have already list  No  Yes. Fill in the details.	ness or financial affai as security (such as th	irs?					
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			ny property or received or debts change	Date transfer was made		
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect  No Yes. Fill in the details.		/ property to a se	elf-settled tru	st or similar device o	of which you are a		
	Name of trust Description and value of the property transferred					Date Transfer was made		
Par	8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Stora	age Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.							
		st 4 digits of count number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?  No	before you filed for	bankruptcy, any	safe deposit	box or other deposi	itory for securities,		
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?		
22.	Have you stored property in a storage unit or pl ■ No □ Yes. Fill in the details.	ace other than your	home within 1 ye	ear before yo	u filed for bankrupto	y?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?		

Case 18-02013-hb Doc 1 Filed 04/20/18 Entered 04/20/18 08:38:12 Desc Main Page 40 of 52 Case number (if known) Document Debtor 1 Lillie Mosley Barthwell Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No ☐ Yes. Fill in the details. Environmental law, if you Name of site Governmental unit Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

☐ Yes. Fill in the details.

Case Title
Court or agency
Nature of the case
Status of the
Case Number
Address (Number, Street, City,
State and ZIP Code)

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

■ A partner in a partnership

☐ An officer, director, or managing executive of a corporation

lacksquare An owner of at least 5% of the voting or equity securities of a corporation

Page 41 of 52 Case number (if known) Document Debtor 1 Lillie Mosley Barthwell No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lillie Mosley Barthwell Signature of Debtor 2 **Lillie Mosley Barthwell** Signature of Debtor 1 Date April 16, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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	ation to identify your t			
Debtor 1	Lillie Mosley Bartl	Middle Name	Last Name	-
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	kruptcy Court for the:	DISTRICT OF SOU	TH CAROLINA	
Case number				☐ Check if this is an amended filing
Official For		n for Indivi	duals Filing Under Cha	oter 7 12/15
Otatemen	it of intentio	ii ioi iiidivi	duals I lillig Officer Office	<b>PICI 1</b> 12/15
If you are an indiv	vidual filing under chap	oter 7, you must fill o	out this form if:	
creditors have	claims secured by you	ır property, or		
You must file this	er is earlier, unless the	thin 30 days after ye	expired.  ou file your bankruptcy petition or by the da time for cause. You must also send copies t	
	ople are filing together d date the form.	in a joint case, both	are equally responsible for supplying corre	ect information. Both debtors must
	nd accurate as possibl ur name and case num		needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
	rs that you listed in Pa		Creditors Who Have Claims Secured by Pro	perty (Official Form 106D), fill in the
	ditor and the property th	at is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Ouaditada <b>F</b> i				<b></b>
Creditor's <b>Fi</b> ll name:	rst Citizens Corp		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of	HHG		Retain the property and redeem it.  Retain the property and enter into a  Reaffirmation Agreement.	■ Yes
property			Retain the property and [explain]:	
securing debt:			avoid lien using 11 U.S.C. § 522(f)	
Ougalitania Ba	. 0		_	_
	r. Cooper		Surrender the property.	■ No
name:			Retain the property and redeem it.	☐ Yes
Description of	115 Deadfall Road	E	Retain the property and enter into a Reaffirmation Agreement.	<b>=</b> 166
property securing debt:	Greenwood, SC 29	649	☐ Retain the property and [explain]:	
Creditor's Or	neMain		☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description of	HHG		☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property			Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Lillie Mosley Barthwell	Case number (if known)				
securing debt:	avoid lien using 11 U.S.C. § 522(f)				
Creditor's <b>Quick Credit</b> name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No			
Description of <b>HHG</b> property securing debt:	<ul> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)</li> </ul>	■ Yes			
Creditor's Security Finance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No			
Description of <b>HHG</b> property securing debt:	<ul> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)</li> </ul>	■ Yes			
Creditor's Southern Finance name:	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a	□ No ■ Yes			
Description of <b>HHG</b> property securing debt:	Reaffirmation Agreement.  Retain the property and [explain]:  avoid lien using 11 U.S.C. § 522(f)	<b>—</b> 165			
Creditor's Specialized Loan Servicing/SLS name:  Description of property Greenwood, SC 29649 securing debt:	■ Surrender the property.  □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ No □ Yes			
Creditor's Western Shamrock Corp name:  Description of HHG	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	□ No ■ Yes			
property securing debt:	■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)				
Part 2: List Your Unexpired Personal Property Lease For any unexpired personal property lease that you list in the information below. Do not list real estate leases. You may assume an unexpired personal property lease	ed in Schedule G: Executory Contracts and Unex Unexpired leases are leases that are still in effect	; the lease period has not yet ended.			
Describe your unexpired personal property leases		Will the lease be assumed?			
Lessor's name:		□ No			
Description of leased Property:		☐ Yes			
Lessor's name:		□ No			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Lillie Mosley Barthwell	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased	☐ Yes
Property:  Lessor's name:  Description of leased	☐ Yes
Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention ab property that is subject to an unexpired lease.	
X /s/ Lillie Mosley Barthwell Lillie Mosley Barthwell Signature of Debtor 1	X Signature of Debtor 2
Date April 16, 2018	Date

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Fill in th	nis information to identify your case:				only as d	irected in this form and	in Form
Debtor	1 Lillie Mosley Barthwell		12	2A-1Supp:			
Debtor (Spouse,				■ 1. There	is no pres	umption of abuse	
United	States Bankruptcy Court for the: District of South Co	arolina		applie	s will be n	o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2).	
Case n (if known)				☐ 3. The Mo	eans Test	does not apply now be service but it could ap	
						n amended filing	p.y later.
Offic	ial Form 122A - 1			_ 000		g	
	pter 7 Statement of Your Cur	rent Moi	nthly Inc	ome			12/15
attach a case nur	mplete and accurate as possible. If two married people a separate sheet to this form. Include the line number to w nber (if known). If you believe that you are exempted from g military service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the addition m a presumption	nal information a of abuse becau	applies. On thuse you do no	ne top of a	ny additional pages, writ narily consumer debts o	e your name and r because of
1. <b>W</b>	hat is your marital and filing status? Check one on	ıly.					
	Not married. Fill out Column A, lines 2-11.						
	Married and your spouse is filing with you. Fill ou	ıt both Columns	A and B, lines	2-11.			
	Married and your spouse is NOT filing with you.	You and your s	spouse are:				
	$\hfill\square$ Living in the same household and are not lega	Ily separated.	Fill out both Co	lumns A and	B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally separated	d under nonbar	nkruptcy law	that applie	es or that you and your	
101(1 the 6	n the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m months, add the income for all 6 months and divide the total ses own the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh August 31 de any income	. If the amo amount m	ount of your monthly incon ore than once. For examp	ne varied during le, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, a syroll deductions).	and commission	ons (before all	\$	0.00	\$	
	<b>limony and maintenance payments.</b> Do not include blumn B is filled in.	payments from	a spouse if	\$	0.00	\$	
<b>of</b> fro ar	Il amounts from any source which are regularly pa you or your dependents, including child support. om an unmarried partner, members of your household nd roommates. Include regular contributions from a sp ed in. Do not include payments you listed on line 3.	Include regular d, your depende	r contributions nts, parents,	\$	0.00	\$	
	et income from operating a business, profession,	or farm					
			otor 1				
	ross receipts (before all deductions)	\$ 0.00					
	rdinary and necessary operating expenses	-\$ 0.00	Copy here ->	œ.	0.00	\$	
	et monthly income from a business, profession, or farr	n \$	Copy liere ->	, ф	0.00	Ψ	
6. <b>N</b> e	et income from rental and other real property	Deb	otor 1				
G	ross receipts (before all deductions)	\$ 0.00					
	rdinary and necessary operating expenses	-\$ 0.00					
İ	et monthly income from rental or other real property	·	Copy here ->	\$	0.00	\$	
	terest, dividends, and royalties			\$	0.00	\$	
	· · · · · · · · · · · · · · · · · · ·						

Official Form 122A-1

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					umn A otor 1		Colum Debto non-fi		
8.	Unemployment compensation			\$		0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benefi	it under	•					
	For you\$	0.0	00						
	For your spouse \$								
9.	<b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.	nount received that was	s a	\$_	1,	288.75	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or payment manity, or international	ts or	¢		0.00	¢		
	·			φ_		0.00	Φ		
	<del></del>			<b>&gt;</b> _		0.00	\$		
	Total amounts from separate pages, if any.		+	<u> </u>		0.00	<u> </u>		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the Column A to		\$	1,28	8.75	+\$_		Total incom	1,288.75
art	Determine Whether the Means Test Applies to	o You							
12.	Calculate your current monthly income for the year.	Follow these steps:							
	12a. Copy your total current monthly income from line 1	1			Сор	y line 11 l	nere=>	\$	1,288.75
	Multiply by 12 (the number of months in a year)							X	12
	12b. The result is your annual income for this part of the	e form						12b. \$	15,465.00
13.	Calculate the median family income that applies to	you. Follow these step	s:						
	Fill in the state in which you live.	SC							
	Fill in the number of people in your household.	1							
	Fill in the median family income for your state and size							13. \$	45,740.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank					ate instruc	tions		
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	< 1, <i>TI</i>	nere is	no presun	nption of	abuse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pr	esum	ption o	f abuse is	determin	ed by Form 1	22A-2.
art	3: Sign Below								
	By signing here, I declare under penalty of perjury	that the information or	n this st	ateme	ent and	in any atta	achment	s is true and c	orrect.
	V /s/ Lillia Moslay Barthwell								
	X /s/ Lillie Mosley Barthwell  Lillie Mosley Barthwell  Signature of Debtor 1								
	Date April 16, 2018  MM / DD / YYYY								
	If you checked line 14a, do NOT fill out or file Form	n 122A-2							

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Lillie Mosley Barthwell

Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2017 to 03/31/2018.

#### Line 9 - Pension and retirement income

Source of Income: SC Retirement System

Income by Month:

6 Months Ago:	10/2017	\$1,288.75
5 Months Ago:	11/2017	\$1,288.75
4 Months Ago:	12/2017	\$1,288.75
3 Months Ago:	01/2018	\$1,288.75
2 Months Ago:	02/2018	\$1,288.75
Last Month:	03/2018	\$1,288.75
	Average per month:	\$1,288.75

#### Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	10/2017	\$1,125.00
5 Months Ago:	11/2017	\$1,125.00
4 Months Ago:	12/2017	\$1,125.00
3 Months Ago:	01/2018	\$1,125.00
2 Months Ago:	02/2018	\$1,125.00
Last Month:	03/2018	\$1,125.00
	Average per month:	\$1,125.00

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**District of South Carolina

In re	Lillie Mosley Barthwell		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF C	OMPENSATION OF ATTORN	EY FOR DI	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bank compensation paid to me within one year before be rendered on behalf of the debtor(s) in conte	re the filing of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accep	t	\$	1,132.00
	Prior to the filing of this statement I have	received	\$	1,132.00
			\$	0.00
2.	The source of the compensation paid to me wa	us:		
	☐ Debtor ☐ Other (specify):	Debtor paid \$800.00 in attorney's fe	es to Comptor	Law Firm, P.A.
3.	The source of compensation to be paid to me	s:		
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-discle	osed compensation with any other person unle	ess they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed copy of the agreement, together with a list	compensation with a person or persons who of the names of the people sharing in the cor		
5.	In return for the above-disclosed fee, I have a	greed to render legal service for all aspects of	the bankruptcy	case, including:
	<ul> <li>a. Analysis of the debtor's financial situation.</li> <li>b. Preparation and filing of any petition, sche</li> <li>c. Representation of the debtor at the meeting</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured cred reaffirmation agreements and a 522(f)(2)(A) for avoidance of lie</li> </ul>	dules, statement of affairs and plan which mag of creditors and confirmation hearing, and a itors to reduce to market value; exempplications as needed; preparation an	y be required; ny adjourned hea ption planning	rings thereof;
6.	By agreement with the debtor(s), the above-di Representation of the debtors i any other adversary proceeding	n any dischargeability actions, judicial		es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete states bankruptcy proceeding.	nent of any agreement or arrangement for pay	ment to me for r	epresentation of the debtor(s) in
-	April 16, 2018	/s/ Alecia T. Compto	n	
_	Date	Alecia T. Compton		
		Signature of Attorney Alecia Compton Law	Office. LLC	
		109 Oak Avenue	, <b></b>	
		Suite A	46	
		Greenwood, SC 2964 (864) 450-9042 Fax:		6
		alecia@aleciacompt		
		Name of law firm		

#### LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

### United States Bankruptcy Court District of South Carolina

		Distri	ici of South Caronna	ı	
In re	Lillie Mosley Barthwell			Case No.	
			Debtor(s)	Chapter	7
	C	ERTIFICATION VI	ERIFYING CRED	ITOR MATRIX	
Bankrupt CM/ECF	cy Rule 1007-1 that th , or conventionally file	e master mailing list of d in a typed hard copy	creditors submitted ei scannable format wh	ther on computer di ich has been compa	uant to South Carolina Local skette, electronically filed via ared to, and contains identical currently exist in draft form.
]	Master mailing list of cre	editors submitted via:			
	(a)o	computer diskette			
		cannable hard copy ets submitted)			
	(c) <u>X</u> ele	ctronic version filed via C	CM/ECF		
Date: A	April 16, 2018	/s/ L	illie Mosley Barthwell		
_		Lillie	e Mosley Barthwell		
		Sign	ature of Debtor		
Date: A	April 16, 2018	/s/ A	lecia T. Compton		
_		Sign	nature of Attorney		
			cia T. Compton		
			cia Compton Law Offic	e, LLC	
			Oak Avenue		
		Suite			
			enwood, SC 29646 I) 450-9042   Fax: (864)	450-9046	
		(004	') +30°304∠ I an. (004)	TJU-3U4U	

5847 SC

Typed/Printed Name/Address/Telephone

District Court I.D. Number

ALBERTELLI LAW 1201 MAIN STREET, STE 1450 COLUMBIA SC 29201

CHAD L. BACON, ESQ. FOSTER LAW FIRM 601 E. MCABEE AVENUE SUITE 104 GREENVILLE SC 29601

COMENITY CAPITAL/MPRC PO BOX 182125 COLUMBUS OH 43218

FBCS, INC. 330 S. WARMINSTER RD SUITE 353 HATBORO PA 19040

FINGERHUT
BANKRUPTCY DEPT
6250 RIDGEWOOD RD
SAINT CLOUD MN 56303

FIRST CITIZENS CORP 205 MAIN STREET GREENWOOD SC 29646-2759

HRBLOCK/EMERALD CARD PO BOX 10170 KANSAS CITY MO 64171-0170

IRS
PO BOX 7346
PHILADELPHIA PA 19101-7346

MR. COOPER ATTN: BANKRUPTCY 8950 CYPRESS WATERS BLVD COPPELL TX 75019

MRS BPO, LLC 1930 OLNEY AVE CHERRY HILL NJ 08003 NCB ATTN: BANKRUPTCY ONE ALLIED DRIVE

TREVOSE PA 19053

NCB MANAGEMENT SERVICES PO BOX 1099 LANGHORNE PA 19047

ONEMAIN ATTN: BANKRUPTCY 601 NW 2ND ST EVANSVILLE IN 47708

QUICK CREDIT
724B MONTAGUE AVE
GREENWOOD SC 29649

SANTANDER CONSUMER USA PO BOX 961245 FT WORTH TX 76161

SC DEPT OF REVENUE PO BOX 12265 COLUMBIA SC 29211

SECURITY FINANCE 446 CALHOUN AVENUE GREENWOOD SC 29646

SOUTHERN FINANCE 213 MAIN STREET GREENWOOD SC 29646-2759

SPECIALIZED LOAN SERVICING/SLS ATTN: BANKRUPTCY PO BOX 636005 LITTLETON CO 80163

SYNCHRONY BANK ATTN: BANKRUPTCY PO BOX 965060 ORLANDO FL 32896

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VISA DEPT STORE NATIONAL BANK/MACY'S ATTN: BANKRUPTCY PO BOX 8053 MASON OH 45040

WESTERN SHAMROCK CORP FDBA WESTERN FINANCE 801 S ABE ST STE A SAN ANGELO TX 76903